CAHU CANDIDATES SUBMIT 1 ORIGINAL AND 1 COPY NEIGHBOR ISLAND CANDIDATES: SUBMIT 1 ORIGINAL AND 2 COPIES

#### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

#### DISCLOSURE REPORT CANDIDATE COMMITTEE

PLIEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

(See the Schedule of Reporting Dates to complete this section)		
1st Preliminary Primary	[ ] Amended	
2nd Preliminary Primary	[ ] Short Form	
Final Primary		
Preliminary General	** P &	
First Floation Boried	REPORTING PERIOD	
Final Election Period		
Supplemental	07/01/1999 through 12/31/1999	
	1st Preliminary Primary 2nd Preliminary Primary Final Primary Preliminary General Final Election Period	

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section III (Part 2) on the Back of the Form Before Completing This Section)

COLUMN A

COLUMN B ELECTION PERIOD<sup>2</sup> TOTAL TO DATE

TOTAL THE DEDICE

	TOTAL THIS PERIOD	TOTAL TODATE
Cash on Hand at the Beginning of Election Period (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee)		-1738.76
Cash on Hand at the Beginning of this Reporting Period	4561.44	
Total Receipts with Loans (From Line 17, Column A and B)	1675.00	11435.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)	6236.44	9696.24
5. Subtotal Disbursements (From Line 21, Column A and B)	3384.50	6844.30
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B)	2851.94	2851.94
Columns A and B)  7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Beginning of this Reporting Period	3061.94	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) —(From Line 22, Column A)—	-3061.94	
(c), Total of Expenditures and Fundraising Expenditures (Unpaid) at the Closing of this Reporting Period (Add Lines 7(a) and 7(b))	0.00	
En Schedule E, Line 10)	0.00	
Debts Owed B Ethe Candidate Committee at the Closing of this Reporting Period     (AddLines 7(c) and 8)	0.00	
10. Other Adjustments to Surplus/Deficit (Attach Explanation)	0.00	
11. Subtotal (Add Lines 9 and 10)	0.00	
12. Surplus/Deficit (Subtract Line 11 from Line 6)	2851.94	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Nami mon	W-0123-00	Clithat 1 2	23 JAN 00
Candidate Signature	Date	Treasurer Signature (Deputy)	Dale

<sup>1</sup> Short form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and received no contributions, made no expenditures, and had a deficit or surplus of \$2,000 or let reporting period. Short form reporting requires completion of only Section I, Section II, and Section III (Part 1) of this Disclosure Report.
2 An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election candidate is seeking nomination or election to a two-year office.
Form CC-5 Form CC-5(Rev.11/97)

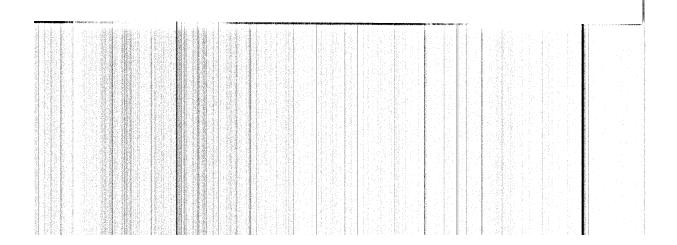
Hermina M. Morita - Mina Morita, A Campaign Committee

COLUMN A

COLUMN B ELECTION PERIOD TOTAL TO DATE

ссн964009

TOTAL THIS PERIOD	TOTAL TO DATE
475.00	4135.00
0.00	0.00
1200.00	6800.00
1675.00	10935.00
0.00	0.00
0.00	0.0
0.00	500.0
0.00	500.0
0.00	0.0
	0.0
-	0.0
	0.0
-	
1675.00	11435.0
	0.0
1675.00	11435.0
0.00	0.0
0.00	0.0
0.00	0.0
0.00	0.0
_ 1675.00	11435.0
3384.50	5160.
0.00	1684.
0.00	0.
0.00	0.
0.00	0.
0.00	0.
3384.50	6844.
322.56	
	475.00  0.00  1200.00  1675.00  0.00  0.00  0.00  0.00  0.00  1675.00  0.00  1675.00  0.00  1675.00  0.00



# STATE OF HAWAII AIGN SPENDING COMMISSON SCHEDULE A

#### MONETARY AND NON-MONETARY CONTRIBUTIONS BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES

	ETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE P			
	ND CANDIDATE COMMITTEE NAME: . Morita – Mina Morita, A Campaigr	ı Committee	PAGE	1 OF1
DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	*REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL) OCCUPATION	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION	AGGREGATE ELECTION PERIOD
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	(IF INDIVIDUAL)	THIS PERIOD	TOTAL TO DATE
08/25/1999	[ ] NON-MONETARY CONTRIBUTION AT&T 500 Ala Moana Blvd., #405 Honolulu, HI 96813-		\$150.00	\$150.00
08/25/1999	[ ] NON-MONETARY CONTRIBUTION DOW Agrosciences, LLC 3835 N. Freeway Blvd., #240 Sacramento, CA 95834-1955	· .	\$200.00	\$200.00
08/25/1999	[ ] NON-MONETARY CONTRIBUTION NOVARTIS Crop Protection, Inc. 1380 Lead Hill Dr. Roseville, CA 95661-		\$200.00	\$200.00
11/15/1999	[ ] NON-MONETARY CONTRIBUTION Anheuser-Busch Companies, Inc.		\$400.00	\$400.00
11/15/1999	[ ] NON-MONETARY CONTRIBUTION Hawaii Pest Control Assn. PAC 677 Ala Moana Blvd., #815 Honolulu, HI 96813-		\$250.00	\$250.00
	[ ] NON-MONETARY CONTRIBUTION			
		-		
	[ ] NON-MONETARY CONTRIBUTION			
1. SUBTOT	AL OF MONETARY AND NON-MONETARY CONTRIBUTI	ONS THIS PERIOD (THIS PAGE)	L	\$1200.00
	OF MONETARY AND NON-MONETARY CONTRIBUTIONS	THIS PERIOD (LAST PAGE THIS LINE	ONLY) (ENTER TOTAL ON THE	\$1200.00
THE DISCLO	OSURE REPORT, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)			orm CC-5(A)(Rev.11/97)

ссн964009

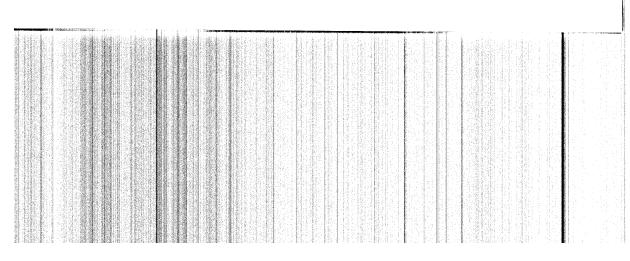
#### STATE OF HAWAII MPAIGN SPENDING COMMISSION

#### SCHEDULE B **EXPENDITURES** CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REP	ORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITIES CONTRIBUTIONS OF	70111121121121		
CANDIDATE AND CANDIDATE	COMMITTEE NAME:	PAGE	1 OF	1
	- Mina Morita, A Campaign Committee			

FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
P.O. Box 29938	Travel & Lodging : airline tickets	\$315.00
Bankcard Center P.O. Box 29450 Honolulu, HI 96820-1850	Credit Card Name : unpaid expenditures	\$2328.85
Bank of Hawaii P.O. Box 959 Hanalei, HI 96714-0959	Bank Charges & Adjustments : service charge	\$2.40
Bank of Hawaii P.O. Box 959 Hanalei, HI 96714-0959	Bank Charges & Adjustments : service charge	\$1.73
Dank of Hawaii P.O. Box 959 Hanalei, HI 96714-0959	Bank Charges & Adjustments : service charge	\$1.63
Bank of Hawaii P.O. Box 959 Hanalei, HI 96714-0959	Bank Charges & Adjustments : service charge	\$1.18
Bank of Hawaii P.O. Box 959 Hanalei, HI 96714-0959	Bank Charges & Adjustments : service charge	\$0.62
	Aloha Airlines, Inc. F.O. Box 29938 Honolulu, HI 96820-  Bankcard Center F.O. Box 29450 Honolulu, HI 96820-1850  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959	Aloha Airlines, Inc. F.O. Box 29938 Honolulu, HI 96820-  Bankcard Center F.O. Box 29450 Honolulu, HI 96820-1850  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959  Bank of Hawaii F.O. Box 959 Hanalei, HI 96714-0959

		₩
1.	SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)	\$2651.41
2.	TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE, ENTER TOTAL FROM SCHEDULE! LINE 4)	<sup>н,</sup> \$733.09
3.	TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION IN(PART 2), LINE 18, COLUMN A)	\$3384.50
		Form CC-5(B) (Rev.11/97)



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1 OF

PAGE

### STATE OF HAWAII CAMPAIGN SPENDING COMMISCON

## SCHEDULE H EXPENDITURES AND FUNDRAISING EXPENDITURES (UNPAID) CANDIDATE COMMITTEE

SCHEIMLE HISHOULD ALSO BE USED FOR UNPAID EXPENDITURES THAT ARE BEING PAID. SEE BELOW LINES 4,5 AND 8 FOR PAID EXPENDITURES AND FUNDALISING EXPENDITURES.
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SULLUCK USED BY ANY PERSON FOR THE PURPOSE OF SOLIGITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

7 : : 5

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Hermina M. Morita - Mina Morita, A Campaign Committee

	DATE OF EXFENDITURE OR FIJNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR PURPOSE OF EXPENDITURE OR FUNDRAISING EXPENDITURE	NEW UNPAID EXPENDITURE OR INCREASE IN UNPAID EXPENDITURE AMOUNT THIS PERIOD	FUNDRAISING EXPENDITURE OR INCREASE IN UNPAID FUNDRAISING EXPENDITURE THIS PERIOD	TOTAL OF NEW UNPAID EXPENDITURE AND FUNDRAISING EXPENDITURE THIS PERIOD
1	ECPENDITORE			morenou	
			-		
			_		
		·	-		
	L		+		
	1. NEW UNP	AID EXPENDITURES THIS PERIOD	\$0.0	0	
ŕ	2. NEW UNP	AID FUNDRAISING EXPENDITURES THIS PERIOD		\$0.0	<u>o</u>
	3. TOTAL OF	NEW UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES	S THIS PERIOD		\$0.00
	4. TOTAL OF	UNPAID EXPENDITURES PAID THIS PERIOD (DO NOT ITEMIZE, ENTER TO	DTAL HERE AND ON SCHEDU	LE B, LINE 2)	3061.94
	5. TOTAL OF	UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (DO NO:	TITEMIZE, ENTER TOTAL HER	E AND ON SCHEDULE F, LIN	£2)\$0.00
	6. TOTAL OF	UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES PAI	D THIS PERIOD (ADD L	.INES 4 AND 5)	3061.94
	7 NET CHAN	NGE THIS PERIOD (SUBTRACT LINE 6 FROM LINE 3. ENTER TOTAL ON THE DISCLO	SURE REPORT, SECTION III (F	PART 2), LINE 22, COLUMN A	-3061.94
	1. 1121 0100				Form CC-5(H) (Rev.11/97)
					1